I. Evaluating Programs

Master of Science Epidemiology
Doctorate in Philosophy Epidemiology

II. Outline Evaluation Process (outline of the visit)

The Final Assessment Report for the evaluation of the programs was based on the following documents: (a) the self-study brief produced by the academic unit, (b) the report produced by the external reviewers following their site visit, and (c) the responses from the Dean, Bernard Jasmin, Faculty of Medicine, and the leadership of the program, Melissa Brouwers, School Director, Ian Colman, Program Director, on the aforementioned documents.

The site visit, which took place on March 29–30, 2022, was conducted by Saverio Stranges, Department of Epidemiology and Biostatistics at Western University, and William Pickett, Department of Health Science at Brock University.

The visit was carried out virtually due to the SARS-CoV-2 pandemic. The reviewers were provided a comprehensive self-study brief that had been previously presented and discussed at the School Assembly prior to revision.

A virtual site visit of the main teaching and administration facilities was made, hosted by the Program Director and Business Manager. Copies of the current strategic plan, samples of syllabi, and the self-study were made available to the reviewers in the two weeks prior to these meetings and visits.

Participants included the following: (1) Claire Turenne-Sjolander, Vice-Provost, Graduate and Postdoctoral Studies; (2) Melissa Brouwers, School Director, Ian Colman, Program Director, Nadine Wiper Bergeron, Associate Dean; (3) a large and representative sample of graduate students from the MSc and PhD programs; (4) faculty members including: Deshayne Fell, David Moher, Alice Zwerling, Jeremy Grimshaw, Tara Elton-Marshall, Beth Potter, Ellen Freeman, Yue Chen, George Wells, Monique Potvin-Kent, Tim Ramsey, Manisha Kulkarni, Vivian Welch, Julian Little, Chris Gravel, Dean Fergusson, Marie-Hélène Gagnon; (5) Karen Littlejohn, Administrator of the Graduate and Postdoctoral Studies Office; (6) Bernard Jasmin, Dean, Alain Stintzi, Vice-Dean (Graduate and Postdoctoral Studies), and Jocelyn Côté, Vice-Dean (Research); (7) Cynthia Abraham, Faculty Wellness representative; (8) Karen Fournier, Research Librarian; and (9) Jennifer Collins, Faculty Business Manager.
III. Summary of Reports on the Quality of Programs

1. EMPHASIZING THE STRENGTHS AND IDENTIFYING CHALLENGES

STRENGTHS

- MSc and PhD programs designed to meet the needs of both society and students. They have a strong track record of producing highly skilled graduates who are sought after.
- The School of Epidemiology and Public Health is highly regarded both nationally and internationally. Its faculty members have a wide range of research interests and expertise, as evidenced by the number of research chairs.
- Excellent student supervision and mentoring.
- The proximity to the Federal Government and five hospital-based research institutes is remarkable.
- The student wellness services are well publicized and easily accessible. It is noteworthy to mention the focus on meeting the specific needs of international students and socially marginalized groups.
- The School of Epidemiology and Public Health continues to play a leadership role at the University of Ottawa for the questions related to equity, diversity, and inclusion.
- At the PhD level, the students benefit from an Independent Study Plan leading to personalized training within the broader program.

CHALLENGES

- Unrealized potential to strengthen collaborations with clinical departments, affiliated hospitals, and other programs at the Faculty of Medicine and other faculties.
- “Consideration of issues of equity, diversity and inclusion (EDI) along with Indigeneity is an important area for the program and academic unit, not least in light of university and faculty institutional priorities and the societal imperative.”
- Delayed completion times were identified as a source of concern for both programs and raised by students, faculty, and senior administration.

2. PROGRAM OBJECTIVES

- The objective of the MSc Epidemiology program is to provide students with knowledge and skills in critical thinking, research-specific skills, and communication in an area of applied health research, as well as to prepare them for further education (PhD degrees in the same or related field) or a career in an academic, government, industrial, or health care setting.
- The PhD program is designed to prepare candidates for a career as a principal investigator conducting independent and high-quality research in academic, government, industrial, or clinical settings.

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1 Based on excerpt, often verbatim, from the self-study, the external evaluation report, and the program and decanal responses.
Extending the work of the 2016–2017 evaluation, the program learning outcomes were revised to increase and improve coverage of equity, diversity, and inclusion issues (EDI).

In general, program requirements are clear and appropriate. Unconscious bias training is now being provided to members of the admissions review committee.

While the external evaluation report praises the program for providing excellent training, its focus was found to be traditional. The external reviewers encourage the program’s leadership to consider adding new streams and content. This could be accomplished in collaboration with clinical departments as well as other faculties, including Health Sciences, Social Sciences, and Business.

Similarly, the reviewers recommend expanding the partnerships with more core programs of the Faculty of Medicine and the Faculty of Health Sciences. The reviewers recommend analyzing and overcoming impediments to inter-faculty interaction, particularly with the PhD program in Population Health housed by the Faculty of Health Sciences.

3. CURRICULUM AND STRUCTURE

According to the external reviewers, the “program structure is conventional and somewhat traditional, yet clearly aligns with national standards for similar programs”. In terms of content, “The reviewers identified no major substantive or methodological gaps within those fields”.

Concerns with times to completion have been raised at all levels, including external evaluation, students, faculty, and senior administration. The delays do not appear to be related to the program’s structure, but rather by the perception of a lack of clear milestones, norms, and expectations regarding time to completion.

Developing micro-credentials in epidemiology and biostatistics has been identified as an area to investigate, given the demand for such training in the clinical world and among federal public service.

4. TEACHING, LEARNING AND EVALUATION METHODS

The external reviewers “identified no major worries or challenges with your instructional methods”. The modes of instruction were found to be appropriate and competently carried out. The “graduates are skilled and in-demand”, according to the external evaluation report.

5. STUDENT EXPERIENCE AND GOVERNANCE

Based on the reports and the interviews, there is a high level of satisfaction regarding student experience in both the MSc and PhD programs in Epidemiology. Students are particularly grateful for the “high level of individual attention”.

However, once the students have completed their course requirements, the program becomes increasingly decentralized because they are dispersed across the affiliated hospital-based research institutions, government research agencies, and other research units. Therefore, some of them feel isolated. As such, students and external
evaluators recommend planning to bring students from various groups together at key points in their programs.

- As with other programs at the University of Ottawa, the online documentation is inadequate. This was reported by the students and raised in the self-study. This may cause students to be confused about what is expected of them.

6. PHYSICAL AND HUMAN RESOURCES

- Given the faculty complement, research chair success, physical space, and historical funding levels, it is clear that the School is well resourced. The same can be said about the learning environment.
- According to the external reviewers, “Faculty also enjoy considerable levels of protected time relative to like programs in other universities”.
- With upcoming retirements and no guarantee of replacement, there is widespread concern about the potential shrinking of the core faculty body, given the centralized allocation of positions.
- Finally, “Unlike the situation in other [departments] within the faculty, there is no minimum stipend policy in [the] MSc program”. Students are concerned about this. Indeed, the situation is likely to worsen because of the institution’s new funding policy. External reviewers are worried that this situation will have an impact on completion time.

IV. Program Improvements

The programs under evaluation are in conformity with the standards of the discipline. The following recommendations aim at maintaining or increasing the level of quality already achieved by the programs.

**Recommendation #1:** Improvement of times to completion

**Recommendation #2:** Equitable stipends for graduate students

**Recommendation #3:** EDI, diversification and internationalization of the student body

**Recommendation #4:** Updated online documentation

**Recommendation #5:** Innovative staffing solutions in the face of impending retirements

**Recommendation #6:** Enhance partnership with clinical departments and affiliated hospitals

**Recommendation #7:** Foster organic working relationships with other core programs

**Recommendation #8:** Revisit comprehensive examination

**Recommendation #9:** Expand the focus of the program

**Recommendation #10:** Foster a sense of community among students

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2 Based on the external evaluation report.
V. Conclusion

According to the external reviewers, “the quality of [the] instructors, trainees, available opportunities, and the vision of [the] programs compare favourably with programs from across the country (and indeed internationally) that are considered leaders in [their] respective disciplines”. The programs are well known and respected. No major issues with “curriculum coherence” were discovered. Nonetheless, this evaluation has identified areas for program improvement. Strengthening collaborations with clinical departments, affiliated hospitals, and other programs at the Faculty of Medicine and other faculties are viewed as an untapped potential.

Given this favourable evaluation, the committee members would like to thank all participants for their contributions to the program evaluation. They commend the unit on the rigour of the work completed as well as the quality of the self-study report and the report produced by the external reviewers.

Schedule and Timelines

A progress report that outlines the completed actions and subsequent results will be submitted to the evaluation committee by December 15, 2024.

The next cyclical review will take place in no more than eight years, in 2028–2029. The self-study brief must be submitted no later than June 15, 2028.
Unit Response and Action Plan

Faculty:
- Faculty of Medicine, School of Epidemiology and Public Health

Programs evaluated:
- Doctorate in Philosophy Epidemiology
- Master of Science Epidemiology

Cyclical review period:
- 2021-2022

Date:
- Text

Notes:
- This document is submitted to the Quality Council and will be published on the University Web site.
- This document should be written in one language only, here, English. It will later be translated to French.

General comments:

On April 26, 2022, the Epidemiology program was made aware of the External Review Report produced in the context of the cyclical program evaluation. We were extremely pleased with the positive evaluation of our graduate program. Given that the Epidemiology graduate program has committed to providing an outstanding training and research experience, we were gratified to see that the external reviewers found that our “MSc and PhD programs were of excellent quality”, that “student satisfaction was high” and that “no major issues with the program, the learning objectives, courses or management of the programs were discovered”. The report makes ten recommendations, of which eight are considered high priority. We take all the recommendations seriously and feel confident that by addressing them, our graduate program will be even stronger. The recommendations and our response, produced jointly by the School of Epidemiology and Public Health and the Faculty of Medicine, are included below.
**Recommendation 1: Improvement of times to completion**

**Unit response:** We agree that improving times to completion should be a priority. We have taken several actions in recent years to address this issue, and will continue to prioritize this. Changes in the last two years include: 1) Implementing a date of June 15 for MSc students to have their thesis or research proposal reviewed and approved; 2) Mandating annual research progress reports for research paper students (previously, only thesis students were required to submit an annual research progress report); 3) Removing required ordering for PhD students to complete courses, pass the comprehensive exam, and have their thesis proposal approved, allowing more flexibility for students to complete milestones as soon as they are ready; 4) Program-related orientation for faculty members with new supervisory privileges, to ensure that they understand program milestones and expectations. Since these changes have been recently implemented, it will take time for change to be observable in time to completion data. However, we remain committed to improving timelines and propose the actions outlined below. We also believe that actions taken to respond to recommendation #2 (implementation of equitable student stipends) may improve times to completion, as students will feel less pressure to seek part-time employment and will consequently have more time to focus on completing program requirements.

**Decanal response:** We agree with the unit's response to improve completion times.

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<th>Curriculum change?</th>
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<td>1</td>
<td>For students beyond the expected program duration of 2 years for the MSc, and 4 years for the PhD, we will implement research progress reports every 4 months instead of every 12 months. In addition, students past these timelines will be required to submit a program plan describing steps towards completion with each progress report.</td>
<td>Program Director &amp; Graduate Studies Office</td>
<td>Fall 2022</td>
<td>No</td>
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<td>1</td>
<td>Program orientation for supervisors will be scheduled for every fall and winter term. Orientation materials will be sent to all supervisors every fall term, and existing supervisors will be asked to review all materials in case of any changes.</td>
<td>Program Director</td>
<td>Fall 2022</td>
<td>No</td>
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<td>1</td>
<td>In order to clarify expectations with regards to scope of proposals, research papers, and theses, exemplars of each will be posted on the student and supervisor resource guide (see response to Recommendation #4).</td>
<td>Program Director</td>
<td>Fall 2022</td>
<td>No</td>
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**Recommendation 2: Equitable stipends for graduate students**

**Unit response:** We agree that stipends for students in our program need to be improved for our programs to remain competitive. We recently mandated a minimum stipend of $7,500 for students in the first year of the MSc program, taking effect in September 2022. This change was made with the expectation that this was a stepping stone to higher levels of support for our students. We recognize the importance of funding to both student wellness and sustaining our programs.

**Decanal response:** We endorse the unit’s response to increase the minimum stipend for MSc and PhD students.

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<td>1</td>
<td>We will, at minimum, double our required minimum stipends for students beginning in September 2023. This will result in a minimum of $15,000 for the first year of the MSc program, and $18,000 for the first four years of the PhD program.</td>
<td>Program Director</td>
<td>Fall 2023</td>
<td>No</td>
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* PRIORITY LEVEL: 1. URGENT-IMMEDIATE ACTION REQUIRED 2. IMPORTANT-ACTION REQUIRED WITHIN 18 MONTHS (MAXIMUM) 3. ADVISED: DEVELOPMENT AND STRATEGY-ACTION TO BE DISCUSSED AND MUST BE IN PLACE BY MID-CYCLE (WITHIN 4 YEARS)
**Recommendation 3: EDI, diversification and internationalization of student body**

**Unit response:** We highly value diversity in our students, and believe that our student population has been highly diverse in recent years. Beginning in 2021: admissions committee members for our MSc in Epidemiology program have been required to complete unconscious bias training (repeated each year); each admissions committee meeting began with a video highlighting how to manage unconscious bias in review committee meetings; and, each admissions committee meeting ended with a review of the applicants who were being offered admission to ensure that it is a diverse group.

Admissions reviewers are somewhat limited by the information collected by the Ontario Universities' Application Centre system. The data elements available to us related to equity, diversity, and inclusion are whether the student: is an international applicant, has permanent resident status in Canada, identifies as Indigenous, reports English not to be their first language, or, does not declare their gender to be male or female. In 2022, we made 49 offers of admissions to the MSc in Epidemiology program. Of those, 20 were made to applicants who identify with one of the groups listed above. We expect that many more have been made to applicants who are visible minority Canadian citizens, are sexual minorities, or have a disability. We can only be aware of such potentially under-represented groups if the applicant discloses relevant information in their letter of intent. This occasionally happens. For example, in 2022, one applicant highlighted a disability they have managed during their academic training; this was a key determinant in deciding to offer the applicant admission.

We believe that diversity in the student population enriches the learning experience for all, and we will continue to emphasize it.

**Decanal response:** We commend the unit for implementing the unconscious bias training and agree with the unit's response.

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<td>1</td>
<td>We will ask admissions committees, to flag applications that come from applicants who are international, permanent residents, identify as Indigenous, report English as a second language, or do not declare their gender to be male or female.</td>
<td>Program Director &amp; Admissions committees</td>
<td>January 2023</td>
<td>No</td>
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<tr>
<td>1</td>
<td>We will discuss with our Graduate Studies Committee and Admissions Committee whether it would be appropriate to have a protected quota for marginalized/under-represented applicants.</td>
<td>Program Director, Graduate Studies Committee, Admissions Committee</td>
<td>Fall 2022</td>
<td>No</td>
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Recommendation 4: Updated online documentation

**Unit response:** We agree that navigation around the University of Ottawa website can be challenging for students, staff, and faculty. This can make following procedures and guidelines difficult. We recognize that making rules and processes transparent has to be a top priority. Consequently, we are in the process of creating a single online hub that will serve as a resource guide for all students, staff, and faculty affiliated with our MSc and PhD in Epidemiology. In addition to providing additional resources, such as orientation materials or exemplar theses, this single hub will have links to all University of Ottawa webpages with official regulations related to the MSc and PhD program. This will ensure that there is not conflicting information posted. The goal is to provide a single landing page that has clear links to existing official documentation to simply navigation.

**Decanal response:** We agree with the unit’s response.

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<td>1</td>
<td>We will create a single central hub that will serve as a landing page for links to all program-related regulations, and serve as a resource guide for students, staff, and faculty affiliated with the MSc and PhD in Epidemiology.</td>
<td>Program Director, SEPH Director, SEPH administrative team</td>
<td>Sept 2022</td>
<td>No</td>
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**Recommendation 5:** Innovative staffing solutions in the face of impending retirements

**Unit response:** This is a core activity that the SEPH Director has taken on. Given the current policies, we recognize that tenure-track positions lost due to retirement are not guaranteed to be returned back SEPH. We will continue to seek new and replacement appointments as part of our strategy. But we are also employing additional tactics to optimize our current faculty complement including role definition of our cross- and adjunct-faculty. We are designing a major modification of the Epidemiology Program into pathways (epidemiology, clinical and health services research, health policy and systems, implementation science). This will enable better engagement of all primary faculty (APUO and RI-funded members) and cross-appointed members. Most notably, there will be more explicit and concrete roles for our clinician cross-appointed colleagues. For example, in the clinical and health services pathway, clinician colleagues will be invited to create special topics and/or reading courses about research issues related to their clinical specialty. This will allow tailoring to their clinical/research interests and also codify existing journal clubs and related activities that are currently in place. Our new education model will enable engagement of other Faculties at uO to explore, for example, potential cross-listings of courses between our School and other departments/schools. Of particular note, we will seek opportunities with Faculty of Health Sciences (methods courses), Faculty of Social Sciences (policy-related courses), and Faculty of Science (biostatistics courses). In addition, we will continue to explore ways to optimize the participation of adjunct faculty members.

**Decanal response:** We support the unit in finding innovative staffing solutions.

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<td>1</td>
<td>SEPH Recruitment Strategy Committee has laid out priority APUO requests. Requests were submitted April 2022. We are awaiting decisions. This will continue to be done on a yearly basis.</td>
<td>SEPH Director</td>
<td>Spring (annually)</td>
<td>N</td>
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<tr>
<td>1</td>
<td>A request for three Replacement Professors has been made to replace the four faculty who will be retiring in the next 12 months.</td>
<td>SEPH Director</td>
<td>Spring 2022</td>
<td>N</td>
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<tr>
<td>1</td>
<td>Adjunct appointees have been recruited to serve a primary role for the MPH program thereby freeing primary-appointed professor time for the Epidemiology program. This will continue into the future.</td>
<td>SEPH Director, Program Director (Epidemiology), Program Director (MPH).</td>
<td>Fall 2022 (annually)</td>
<td>N</td>
</tr>
<tr>
<td>1</td>
<td>Complete, submit, and implement major modification of the Epidemiology graduate program.</td>
<td>SEPH Director and Office Manager (leads). Participation entire SEPH membership.</td>
<td>December 2022 submission of major modification. Implementation once approval is received.</td>
<td>Y</td>
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**Recommendation 6: Enhance partnership with clinical departments and affiliated hospitals**

**Unit response:** We value the relationships with our clinician colleagues. SEPH designed a new terms of reference for cross-appointed faculty whose primary appointment is with a clinical department. The new ToR provides a more expansive and longer list of ways these colleagues can contribute to the education mandate of SEPH. The ToR was approved by Senior Leadership. The Director meets with all new clinician candidates before they submit their request for cross-appointment dossiers to discuss their interests and match with SEPH.

We believe the major modification to the graduate program will be the key strategy to strengthen the participation and relationship with clinician colleagues. Specifically, we are designing a major modification of the Epidemiology Program into pathways (epidemiology, clinical and health services research, health policy and systems, implementation science). This will enable better engagement of all primary faculty (APUO and RI-funded members) and cross-appointed members. Most notably, there will be more explicit and concrete roles for our clinician cross-appointed colleagues. For example, in the clinical and health services pathway, clinician colleagues will be invited to create special topics and/or reading courses about research issues related to their clinical specialty. This will allow tailoring to their clinical/research interests and also codify existing journal clubs and related activities that are currently in place. Our new education model will enable engagement of other Faculties at uO to explore, for example, potential cross-listings of courses between our School and other departments/schools. Of particular note, we will seek opportunities with Faculty of Health Sciences (methods courses), Faculty of Social Sciences (policy-related courses), and Faculty of Science (biostatistics courses).

Strategies to better engage clinician colleagues in the supervision of our graduate students will be explored by SEPH’s Teaching and Personnel Committee and through a working group that will include clinician colleagues.

**Decanal response:** We encourage the unit to explore strategies to enhance partnership with clinical departments and affiliated hospitals.

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<td>Y</td>
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<td>2</td>
<td>Investigate ways to better engage clinician colleagues in the supervision of graduate students.</td>
<td>SEPH Director, STPC, new working group.</td>
<td>Fall 2023</td>
<td>N</td>
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Recommendation 7: Foster organic working relationships with other core programs

Unit response: Within SEPH, we have put in place mechanisms to facilitate cross-fertilization of learners between the individual programs including ensuring equal access to all SEPH courses and creating joint courses. Specially, any SEPH student is entitled to register for any course in the unit whether it be from the Epidemiology, Master of Public Health, or Population Health Risk Assessment and Management programs. Public Health and Preventive Medicine Postgraduate Medical residents often take SEPH courses (or a degree itself) during their academic rotations. Currently, we hold five spots in the Systematic Review course for students in the School of Nursing. In turn, they have provided spots for SEPH students in their Qualitative Methods course. We will continue to explore these relationships. SEPH advertises special topics courses to the wider uOttawa community to invite learners from other faculties to participate, for example, special topics in Journalology and special topics in Knowledge Translation. We will explore how SEPH expertise, can contribute to new FOM and inter-faculty programs that overlap with our areas of excellence (e.g. Translational and Molecular Medicine BSc, MSc and PhD in Translation and Clinical Medicine, and MSc in Global and Planetary Health).

We are designing a major modification of the Epidemiology Program into pathways (epidemiology, clinical and health services research, health policy and systems, implementation science). This will enable better engagement of all primary faculty (APUO and RI-funded members) and cross-appointed members. Most notably, there will be more explicit and concrete roles for our clinician cross-appointed colleagues. For example, in the clinical and health services pathway, clinician colleagues will be invited to create special topics and/or reading courses about research issues related to their clinical specialty. This will allow tailoring to their clinical/research interests and also codify existing journal clubs and related activities that are currently in place. Our new education model will enable engagement of other faculty to explore potential cross-listings of courses between our School and other departments/schools at uO. Of particular note, we will seek opportunities with Faculty of Health Sciences (methods courses), Faculty of Social Sciences (policy-related courses), and Faculty of Science (biostatistics courses).

Pre-pandemic, SEPH established a committee comprising of representatives from each of the research institutes to discuss strategies to strengthen the relationship between the RIs and the School. This was put on hiatus in response to the pandemic. This will be re-established.

Decanal response: We agree with the unit’s response.

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<td>2</td>
<td>Contribute to new FOM and inter-faculty programs (e.g. TMM BSc, MSc and PhD in Translation and Clinical Medicine, MSc in Global and Planetary Health).</td>
<td>SEPH Director (to be responsive to Leads of new graduate programs)</td>
<td>Following timelines of new programs.</td>
<td>N</td>
</tr>
<tr>
<td>2</td>
<td>Re-establish the RI – SEPH committee.</td>
<td>SEPH Director</td>
<td>Fall 2022 – Winter 2023</td>
<td>N</td>
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**Recommendation 8: Revisit comprehensive examination**

**Unit response:** Reconsidering the comprehensive examination for our PhD in Epidemiology students has been a recent priority for our Comprehensive Exam Committee. The Committee recognizes that the current mode of examination, which focuses on foundations of classic epidemiology, may not suit the needs of all PhD students. This was discussed at length in a committee meeting in March 2022. It was agreed, at that time, that a pending major modification of the program (see Recommendation #9) will necessitate revising the focus of the comprehensive examination to ensure that it meets learning outcomes for our diverse group of students. A new format for the comprehensive examination will be implemented at the same time as new pathways within the program (see Recommendation #9) for PhD students, beginning with the cohort commencing in Sept 2024.

**Decanal response:** We agree with the unit’s response.

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<td>3</td>
<td>The comprehensive examination for PhD students will be revised to fit the learning outcomes of students in various program pathways (pathways proposed to be implemented for Sept 2024).</td>
<td>Program Director &amp; Comprehensive Exam Committee</td>
<td>Sept 2024</td>
<td>N</td>
</tr>
</tbody>
</table>

* PRIORITY LEVEL: 1. URGENT-IMMEDIATE ACTION REQUIRED 2. IMPORTANT-ACTION REQUIRED WITHIN 18 MONTHS (MAXIMUM) 3. ADVISED: DEVELOPMENT AND STRATEGY-ACTION TO BE DISCUSSED AND MUST BE IN PLACE BY MID-CYCLE (WITHIN 4 YEARS)
**Recommendation 9: Expand focus of the program**

**Unit response:** We agree that there are many opportunities to expand the focus of the program, given the breadth of expertise affiliated faculty members have that are related to the field of epidemiology. Expanding the focus would also allow more flexibility for students, and allow for more opportunities for focused training in areas related to their chosen research area. To that end, our School held an educational retreat on Friday, May 6, 2022, to discuss options. There was widespread support for more modifications to our program to allow specific pathways within the program. All students would receive introductory training in public health, epidemiology, and biostatistics. Beyond that, students will have chosen one of several pathways (final pathways to be determined within the School and confirmed through a major modification): 1) epidemiology (classical/traditional), 2) clinical research, 3) knowledge translation and implementation science, 4) health services research and policy, and, 5) global health. Each pathway will have its own set of required and optional courses, beyond the introductory courses for all MSc students mentioned above. We believe this will better suit the needs of our students, with the added benefit of engaging cross and adjunct faculty members.

While the focus of the retreat was the MSc program, it is expected that similar pathways will be offered at the PhD level as well. This will be confirmed at an additional retreat or School Assembly in fall 2022.

**Decanal response:** We agree with the unit’s response.

<table>
<thead>
<tr>
<th>Priority Level*</th>
<th>Actions to be undertaken</th>
<th>Assigned to</th>
<th>Timeline</th>
<th>Curriculum change?</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Major modification of the MSc and PhD in Epidemiology program to implement a choice of pathways within the program</td>
<td>Program Director, Graduate Studies Committee, SEPH School Assembly, Graduate Studies Office</td>
<td>Sept 2024</td>
<td>Yes – major modification</td>
</tr>
</tbody>
</table>
**Recommendation 10:** Foster a sense of community among students

**Unit response:** Fostering a sense of community among students has always been very important for our School. The School has a vibrant Graduate Students Association (SEPHGSA), that helps coordinate resources for students, organizes social events for students, and provides opportunities for engagement in School administration. The School supports the SEPHGSA and facilitates their activities. Student representatives are members of all standing SEPH committees (for most committees, at least one MSc representative, one PhD representative, and at least one MPH representative). The SEPH Equity, Diversity, and Inclusion committee comprises of a mix of several students, staff, and faculty members, and is co-led by a student representative.

The School also has a long history of organizing social events to promote interaction between students and with staff and faculty. These include annual orientation barbecues, an annual Halloween party, an annual holiday party, and an annual social reception at the end of Student Research Day. These events have necessarily been cancelled during the Covid-19 pandemic, which may have led to recent lower feelings of belonging among the student population. We look forward to returning to an active social calendar when public health guidelines allow for it.

**Decanal response:** We agree with the actions proposed by the unit to foster a sense of community among students.

<table>
<thead>
<tr>
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<th>Timeline</th>
<th>Curriculum change?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>We will re-introduce numerous annual social gatherings at orientation, Halloween, December holidays, and at Student Research Day</td>
<td>Program Director, SEPH Director, SEPH administrative team</td>
<td>Sept 2022</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>We will continue with the recently implemented Janet Wendy and John Last research seminar series, and discuss a recent proposal to start an informal journal club to bring students and faculty together in a social setting</td>
<td>Program Director, SEPH John Last research seminar series committee, Graduate Studies Committee</td>
<td>Sept 2022</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>We will meet with the SEPHGSA to discuss further opportunities to engage students in our community</td>
<td>Program Director &amp; Graduate Studies Committee</td>
<td>Sept 2022</td>
<td>No</td>
</tr>
</tbody>
</table>

* PRIORITY LEVEL: 1. URGENT-IMMEDIATE ACTION REQUIRED 2. IMPORTANT-ACTION REQUIRED WITHIN 18 MONTHS (MAXIMUM) 3. ADVISED: DEVELOPMENT AND STRATEGY-ACTION TO BE DISCUSSED AND MUST BE IN PLACE BY MID-CYCLE (WITHIN 4 YEARS)